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MMC Nursing...Caring Through Leadership, Knowledge & Compassion

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MMC Nursing...Caring through Leadership, Knowledge & Compassion




Maine Medical Center
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centered around you

Leadership Message

Exemplary professional practice is a hallmark of the care delivered at Maine Medical Center. The nursing staff utilize many resources to ensure that their practice is based on the best available evidence and the most current and scientifically rigorous research. In addition, they undertake their own initiatives and investigations that contribute greatly to the body of nursing knowledge. This volume of the nursing report identifies much of the work done throughout 2007 and 2008. It both catalogues and celebrates the many consultations, presentations and publications that represent the dissemination of their accomplishments and expertise with the nursing community at large. It is with great pride we share this work with you.



Marjorie S. Wiggins and Kristiina Hyrkäs

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Outcomes

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Introduction

The Center for Nursing Research and Quality Outcomes (CNRQO) supports the Department of Nursing in its goal to realize and surpass excellence in nursing practice and patient care. The Center is charged with promoting improvements in clinical care and outcomes through: examination and evaluation of performance measures and nurse-sensitive indicators; translation, synthesis and implementation of existing knowledge into practice; generation of new scientific knowledge; and implementation of best practices.

As evidence based practice, quality and research have become deeply embedded in the culture of Maine Medical Center and in the work that our clinical nurses do every day, the Center has become broadly engaged in supporting all of the various aspects of this professional practice. Today, the Center is comprised of an interdisciplinary team with the diversity of backgrounds and experience that facilitate: education and mentoring of our health care providers; critical thinking and assessment of new ways to provide high quality care; discovery of practice innovations; ongoing development of Partnership Care Delivery as an evidence based practice model; alignment with Magnet standards of excellence; presentation and dissemination of best practices; and outreach into the community.

The Center supports the work of the Nursing Quality, Practice, Research and Magnet Councils. It also collaborates with disciplines outside of nursing and with faculty from academic settings in the achievement of its goals.

In 2007-2008, nurses submitted 48 research proposals for IRB review: 31 were expedited reviews and 17 exemptions. One study had a continuing review and 23 were reviewed for follow-up. Eleven studies were closed. (Table 1)

Table 1. Submissions of IRB Proposals, Reviews & Closed Studies in 2007-2008

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
New Proposals Expedited	2	5	2	2	4		2	2	2	2	6	2	31
Exemptions	3	1		2	2	1		1	2	1	3	1	17
Follow-up, Expedited Reviews	3	1	1	1		2	6		2	2	3	2	23
Continuing Review – Active – Full Board		1											1
Closed studies		1	2		2		1	2	1			2	11
Terminated/ Suspended/ Withdrawn Studies				1					1				2
Total	8	9	5	6	8	3	9	5	8	5	12	7	85

Research

The following is a list of nurse-initiated and interdisciplinary research and quality improvement projects started in 2007 and 2008.

Bachand, D., RN, Principal Investigator

A Longitudinal Study of Patients' and Nurses' Perceptions of Partnership Rounding

The purpose of this study is to: (1) describe the patients', nurses' and nurse managers' perceptions of the report prior to and following the changes from tape recorded to partnership rounding with the patients; (2) describe the changes in patients', nurses' and nurse managers' perceptions regarding the purpose of partnership rounding, the level of patient participation and the factors that promote or prevent their participation at three months and six months after the start of the rounding on the units; (3) provide evidence/research based recommendations to the other units at MMC regarding the best way to implement partnership rounding; and (4) provide information for the development of the Partnership Care Delivery Model. (This study received Expedited IRB approval on February 5, 2008.)

Benson, S., MD & Lacombe, P., RN, BSN (Clinical Scholar Program 2007)

A Prospective Observational Study on the Use of Iodinated Contrast for AV Fistula Salvage in Stage 4/5 CKD Utilizing Bicarbonate Prophylaxis.

This study is being done to determine if IV dye has any effect on kidney function and to help determine what dose of IV dye is safe in patients with advanced kidney disease. The effect of IV dye on kidney function will be tested by taking blood and urine tests before and after the procedure. (This study received Expedited IRB approval on October 11, 2007.)

Barbor M., RN (CNL student), Principal Investigator

Glucose Control Baseline Data for Vascular Surgery Patients

This study is intended to be the first phase of a greater project. The data collected from this chart review will serve as the baseline data for future comparison studies after the implementation of the new basal-bolus insulin protocols. This will emphasize the quality indicators that generate improved patient care. (This study received Expedited IRB approval on December 3, 2008.)

continued

Cobb D., RN, BSN & Loney, J., RN, BSN (Clinical Scholar Program 2007)*A Prospective Review on Hospital Collection of Patients' Race and Ethnicity Data*

The purpose of this study is to describe inaccuracies in the collection of data on race and ethnicity and suggest how they contribute disparities in health care by concealing cultural diversity of the patient populations at Maine Medical Center and Mid Coast Hospital. Findings will be disseminated in an effort to illustrate discrepancies in data and make recommendations for improved data collection practices. (This study received Expedited IRB approval in September 15, 2008.)

Coyne, C., RN, BSN; Hopkins, E., RN, BSN; Kent, G., RN, BSN; & Mullen, D., RN, BSN (Clinical Scholar Program 2007)*Use of the Berlin Questionnaire in an Outpatient Setting to Screen Adult Patients for Risk of Obstructive Sleep Apnea*

The purpose of this study is to evaluate the incidence of sleep apnea in the adult population. The hypothesis is that with proper screening and education by nurses at the bedside, patients identified as high risk for OSA (obstructive sleep apnea) will initiate follow up with their health care providers. This follow up should improve overall health status and reduce risk of associated co-morbidities. (This study received Expedited IRB approval on November 8, 2007.)

DiFiore, G., RN, BSN*Is Personal Hardiness a Predictor for CNA Retention?*

The purpose of this study is to examine the relationship between psychological hardiness and retention rates in the CNA (Certified Nurse Assistant) population. (This study received Expedited IRB approval on February 28, 2008)

Eon, M., RRT (Clinical Scholar Program 2007)*Epworth Sleepiness Scale Evaluation*

The purpose of this study is to evaluate how the Epworth Sleepiness Scale (ESS) score correlates to a positive AHI (apnea-hypopnea index) (AHI>5) and thus how reliable it is in screening patients for Sleep Disorder Breathing (SDB). A correlation between sleep latency (how long it takes a person to fall asleep once the lights are turned off), ESS score prior to a diagnostic and therapeutic PSG (polysomnographic) study, gender and age will be evaluated. (This study received Expedited IRB approval on November 5, 2007.)

Hammond J., RN, BSN*Blooming Where We Are Planted: A Family Birth Center Discharge Class Quality Project*

The purpose of this quality improvement project was to increase new mothers' confidence in caring for themselves and their infant by providing consistent, up to date, evidence based discharge classes and to improve patient flow, by having families prepared for discharge. (This project received IRB Exemption in June 8, 2007.)

Hardman A.M., RN, MSN (Clinical Scholar Program 2007, Southern Maine Medical Center)*Will Implementation of AACN Healthy Work Environment Increase the New Graduate Nurse Retention as Compared with Current Practice?*

The purpose of this study is to identify work environment stressors that interfere with the orientation and retention of the new graduate nurse. The proposed study focus is on identifying the environmental supports that enhance the retention of the new graduate nurse. (This study received Expedited IRB approval on July 20, 2007.)

Harvey, K., MPH; Kramlich D., RN, BSN, CCRN; Hyrkäs, K., RN, MNSc, LicNSc, PhD; Chapman, J., RN, MSN, M.Ed, NE-BC; Parker, J., RN, CPN; Blades, E., RN

Assessing the Sensitivity, Specificity and Reliability of Five Pediatric Falls Risk Assessment Tools

The purpose of this study is to determine the most reliable and valid measure of fall prediction in the pediatric patient population to reduce risk of harm or death from injury related falls. The study aims to simultaneously test the sensitivity and specificity of five existing instruments to reveal a degree of equivalence in predicting fall risk and likelihood of fall event within the intended population at Barbara Bush Children's Hospital at MMC. The results will provide a baseline reference to support the design and evaluation of further study towards implementation of a house-wide pediatric fall prevention program. (This study received Expedited IRB Approval on May 1, 2008.)

Haskell, W., RN, CEN

Geriatric Patients in the Maine Medical Center Emergency Department

This quality improvement project was generated to aid geriatric patients (and their families) seen and discharged from the ED access necessary services from their homes. (This study was exempted by the IRB on December 18, 2007.)

Hewitt (Speare), H., RN, BA, BSN and Gardner, M., RN, BSN (Clinical Scholar Program, 2007/Midcoast Hospital)

An Educational Effort to Improve Accuracy of Lead Placement in the ICU

The purpose of this study is twofold: (1) to assess accuracy of lead placement as it is currently practiced, and (2) to assess accuracy of lead placement after educational offerings have been completed for the nursing staff. (This study received Expedited IRB Approval on November 7, 2007.)

Honess, C., RN, MSN, APN; Lord, C., RN, BSN; Guerin, W., RN, BSN; Kovacs, S., RN, BSN; Tourangeau, J., RN, BSN; Sansoucey, S., RN, BSN; and Potter, S., RN, BSN

Education Enhancing Lead Selection to Observe the Cardiac ST Segment for Myocardial Ischemia

The purpose of this quality improvement project was to provide continuous monitoring of the cardiac cycle's ST segment in an effort to detect myocardial ischemia in those patients with a diagnosis of Acute Coronary Syndrome. (This study was exempted by the IRB on November 31, 2007.)

Honess, C., RN, MSN, APN (Principal Investigator)

Implementation of Practice Standards for ECG Monitoring

The purpose of this multi-site clinical trial is to improve nursing practice related to ECG monitoring in hospital settings for better decision and diagnosis of cardiac arrhythmias, myocardial ischemia, and drug-induced prolonged QT syndrome. (This study received Expedited IRB approval on October 27, 2008.)

continued

Keane, K., RN, BSN, CCRN*Clinical Practice Standards for ECG (Electrocardiogram) Monitoring: Translating Evidence into Practice in the Cardio-Thoracic Intensive Care Unit*

Current evidence based practice guideline recommendations for ECG monitoring specific to the CTICU setting were reviewed as part of this quality improvement project. ECG tracings (both monitor tracings and 12 lead ECGs) were collected for teaching purposes. Educational interventions included: a PowerPoint eLearn, a unit-based skills fair for individualized teaching, a written skills assessment pre- and post-teaching interventions, and ongoing assessment of clinical practice to provide feedback in real time data to staff. (This study was exempted by the IRB on November 7, 2007.)

Keane, K., RN, BSN, CCRN (Principal Investigator)*Validity and Reliability of the Critical Care Pain Observation Tool (CPOT): A Pilot [Replication] Study*

The purpose of this study is to measure the discriminant and criterion validity as well as the reliability of the CPOT tool. Discriminant function analysis will be used to determine which variables discriminate between two or more naturally occurring groups. (This study received Expedited IRB approval on June 27, 2008)

Kolbe, G., RN, MS (Principal Investigator) (Clinical Scholar Program 2008, House-wide Study)*Evaluating Preceptors' and Preceptees' Satisfaction Concerning Preceptorship and the Preceptor-Preceptee Relationship*

The purpose of this study is to investigate preceptor and preceptee relationship and satisfaction, preceptors' perceptions of benefits, rewards, and commitment to their role, job satisfaction among preceptors and preceptees, and preceptees' nursing performance. (This study received Expedited IRB approval on August 6, 2008.)

Kramlich, D., RN, BSN, CCRN (Sabbatical Program 2007)*Families' Lived Experience of the Resuscitation of a Loved One*

The purpose of this study is to gain a better understanding of the lived experiences of families when their loved ones are experiencing cardio-respiratory or trauma arrest to assist in the development of guidelines for family presence. (This study received Expedited IRB approval on December 19, 2007. "Development of Guidelines for Family Presence during Resuscitation" was Exempted by the IRB on November 30, 2006.)

Lancaster, K., RN, BSN, CAPA*Family Centered Care: A Survey of Perceptions and Practices in the Perianesthesia Setting*

The purpose of this study is to gather information on health care professionals' perceptions and practices regarding family-centered care in the perianesthesia environment. Based on the information obtained, educational intervention will be provided to assist with the development of additional skills necessary to enhance the understanding and the practice of family centered care. (This study received Expedited IRB approval on March 23, 2007.)

Manchester, N., RN, CNL (Principal investigator)*Adult Tracheostomy Team*

The goal of this quality improvement project is to promote the use of evidence based practice and standardized care to minimize complications for all adult patients with a tracheostomy. The project is an interdisciplinary initiative coordinated by the clinical nurse leaders, respiratory therapists and unit-based educators who share responsibility of facilitating the rounds each week on all adult patients. (This study was exempted by the IRB on September 15, 2008.)

McCluskey, T., RN, BSN & Thompson, E., RN, BSN (Clinical Scholar Program 2007)

A Comparison of Prilocaine/Lidocaine Cream to Tetracaine/Lidocaine as an Anesthetic for Pediatric Venipuncture

The purpose of this study is to compare the effectiveness of prilocaine/lidocaine mixture to tetracaine/lidocaine as a topical anesthesia prior to veinpuncture in children. The hypothesis is that the tetracaine/lidocaine cream will work more effectively and more quickly than the prilocaine/lidocaine mixture. (This study received Expedited IRB approval on August 16, 2007.)

Morse, C.J., RN, BSN & Knutson, J., RN, BSN (Clinical Scholar Program 2007)

A Comparison of the Ankle Brachial Index (ABI) to Pulse Palpation/Doppler Assessment in Infrainguinal Bypass Patients.

This study compares three different assessment measurements for graft patency for the patient who has undergone an infrainguinal bypass graft. Policies for best practice for this cohort will be written based on the results of this study. (This study received Expedited IRB approval on April 17, 2008.)

Morton, J., RN, MS, MPH & Konrad, S., RN, PhD

Caring Practices of Health Professionals from the Perspectives of Women with Infants who Experience Problematic Substance Use

This research is being done because health care professionals would benefit from greater knowledge and skills in understanding the experiences of mothers affected by substance abuse. Both quantitative and qualitative methods are used to explore the perceptions and experiences that mothers have had with health professionals before, during and immediately following the birth of their infants. The findings of the study will be used to create a professional health care curriculum that addresses the unique needs of this population. (This study received Expedited IRB approval on January 18, 2008.)

O'Brien, C., RN, BSN (Clinical Scholar Program 2007)

A Comparison of Treatment Options for Oral Mucositis in Head and Neck Radiation Oncology Patients

The purpose of this study is to compare current practice of Baking Soda and water to Gelclair® as treatment option for head and neck radiation oncology patients as a means to prevent or decrease the incidence of oral mucositis. The goal is to eliminate Grade III or IV oral mucositis. A new policy will be written and put into practice. (This study received Expedited IRB approval on February 13, 2008.)

Orff, S., RN, CNL (Principal investigator)

Clostridium Difficile: A Collaborative Effort between the Clinical Nurse Leader, the Department of Epidemiology, and Information Services to Improve Flow, Patient Outcomes, and the Environment for the Patient Being Ruled Out for Clostridium Difficile

The purpose of this project in collaboration with infection control and IT is to develop and utilize a new order set and an educational decision tree and to evaluate the effects through data collection on patient flow, patient outcomes, and the environment of patients being ruled out for Clostridium Difficile. Lastly, the hope is to decrease the financial burden to the patient and the facility by eliminating: unnecessary testing, decreasing precaution days, making better use of resources, and decreasing the use of blocked beds. (This study was Exempted by the IRB on November 11, 2008.)

Palmer, D., RN, MS; Kramlich, D., RN, BSN, CCRN; Gallant, P., RN, MSN, CNL & Lancaster, K., RN, BSN, CAPA

An Understanding of Nurses' Learning Perceptions

The purpose of this research study is to understand nurses' perceptions regarding the learning process after having attended the Clinical Scholar Program at MMC. (This study received Expedited IRB approval on October 20, 2008.)

Peters, C., RN, BS; Hyrkäs, K., RN, PhD; Devlin, J., M.D; Dende, D., MFA & Harvey, K., BS, MPH

Use of Focus Groups to Better Understand Current RN Perceptions, Procedures and Barriers to Implementation of a Tight Glycemic Control Protocol

The purpose of this study is to learn more about RNs' current perceptions of glycemic control and processes that have impacted the implementation of a tight glycemic control protocol. This study is the first part of a larger initiative examining and developing the best practices and protocol for glycemic control at MMC. (This study received Expedited IRB approval on October 22, 2007.)

Reilly, K., BS; Cleaves, J., RN, BSN; Doliner, P., RN, BSN

An Inpatient Trial of My Healthcare Journal

This study pilot tested patients' use of a medical journal as a communication tool on two units. The patients' responded very positively to the use of a journal, as did both the nurses and physicians providing their care. The journal was well received and the future plan is to implement the use of the journals house wide. (This study was Exempted by the IRB on April 23, 2007.)

Robert, J.A., RN, BSN; Dann, E., RN, BSN; Stewart, M., RN, BSN; Nesbitt, M., RN, MSN (Clinical Scholar Program 2007)

Evaluation of the Adult Oncology Cancer Chemotherapy Verification Checklist as a Support to the Verification Process

The purpose of this study is to: (1) learn if the cancer chemotherapy verification checklist has increased nursing confidence and satisfaction when performing chemotherapy verification, (2) learn if there are any staff barriers to using the checklist and (3) learn of any improvements that need to be made in the chemotherapy verification process. The results of this study helped to provide a "checks and balances" system in the safe administration of medications to oncology patients. (This study received Expedited IRB approval on February 14, 2007.)

Rouleau, D., RN, BSN (CNL student)

Pilot Study of Survey Instruments Used in the Medication Adherence Initiative at Maine Medical Center

The purpose of this study is to identify and develop procedures, processes and tools that nurses can use to conduct follow up phone calls that improve medication adherence as well as improve interpersonal relationships with the patients. The hypothesis is that by enhancing continuity of care and expanding care into the community beyond the hospital setting, patients will become engaged as partners in their own care. Patients will feel more empowered, have an increased sense of self-efficacy and will improve their adherence to their prescribed medication regimens. This will be a methodological study that will pilot-test the validity and reliability of patient survey tools that will be used during follow up phone calls. The follow-up telephone calls post discharge will be made at 48-72 hours post discharge and 30 days post discharge. (This study was Exempted by the IRB on December 29, 2008.)

Stewart, M., RN, BSN; Robert, J.A., RN, BSN & Nesbitt, M., RN, MSN

A Survey to Describe Women's Self Reported Experience of Having Gynecologic/Oncology Surgery

The purpose of this study is to learn about the quality of care, education and discharge planning from patients having gynecologic/oncology surgery. Learning from patients' self report will provide an opportunity to identify areas of strengths and weaknesses of the current quality of care prior to admission and during the inpatient stay. (This study received Expedited IRB approval on April 1, 2008.)

Swan, N., RN, MSN & Wilson, J., RN, BSN (Clinical Scholar Program 2007)

Barriers To the Admit Nurse Role.

The role of the "admit nurse" serving as a liaison between the Emergency Department and R7 is the focus of this study. The findings will guide protocol development that can shorten ED wait time and overall length of stay. (This study was Exempted by the IRB in September 19, 2007.)

Vreeland, S., RN, MS (Sabbatical Program 2007)

Hospital-Acquired Urinary Tract Infections in Elderly Trauma Patients

The purpose of this project was to develop a clinical pathway from data collected on current UTI rates that will reduce urinary tract infections in elderly trauma patients. (This study was exempted by the IRB in December 19, 2007.)

DATA SUBMISSION PROTOCOL

In 2007, Kimberly Harvey, MPH, Data Analyst, developed a data submission protocol for researchers. This was done to create a systematic, clear and efficient process for those nurses anticipating analysis of their quantitative data projects. The protocol facilitates the completion of projects for manuscript and abstract submissions as well as for other presentations. The protocol includes directional guidelines as to what to submit along with data materials, general questions to consider, and what to expect once analysis is completed. The protocol can serve as a general template for all nurses; however, it is most useful for those seeking statistical analysis of raw data. The data submission protocol was presented and accepted by the Nursing Research Council on June 6, 2007.

DATA PROCESSING AND ORGANIZATION

There were a total of 47 projects analyzed quantitatively by the Center during 2007-2008. The Center has a small to medium volume of data with sample sizes ranging from 25 to 1,540. The Center's data analyst maintains a project tracking log, which is a database of past, present, and future projects that details the research topic, type of data being used and the current status of the research and/or analysis. (Table 2)

Table 2. Projects Analyzed in 2007-2008

Type of Research/ Initiative	No. of Projects Analyzed	
	2007	2008
Quantitative	24	23
Qualitative	2	6
Quality Improvement	12	10
Cumulative	38	39

Year	Avg. Completion Time (in days)	No. of Ongoing Projects
2007	42.9	6
2008	39.8	7
Cumulative	42.8	13

Data is analyzed by a variety of statistical methods. The focus is on basic theoretical and applied research principles that consider relevance to policy, prior findings in existing literature and/or results of previous research. These methods include but are not limited to, descriptive and nominal statistics, estimation, graphical summarization, outlier detection, nonlinear models, experiment/survey design, correlation and regression modeling, survival and event history analysis, and model validation, comparison and improvement. For survey oriented research, nurses are encouraged to use published and validated instruments.

The Center currently utilizes the Statistical Package for the Social Sciences (SPSS, Inc. 2007) and Statistical Analysis Software (SAS Institute, Inc. Cary, NC) for the analysis of quantitative data and other software such as Power Analysis and Sample Size (PASS, National Council for the Social Studies, 2008) and PS – Power and Sample (Dupont & Plummer, 1997) for sampling and power analyses. The Center also has available NVivo (QSR Intl.) software as a tool for textual analysis of qualitative research data. Nurses who undertake qualitative research typically analyze their own data. The Center provides access to and assistance on the usage, navigation and comprehension of analysis programs to nurses who would like to use them.

Quality

QUALITY OUTCOMES AND STATISTICS

The Center processes and reports data which is used for benchmarking and quality improvement initiatives. In 2006, the Center's data analyst began the design of an electronic database to capture incidence/prevalence data for pressure ulcers (Figure 1). Universal accessibility supports data entry at the unit level from any clinical workstation and/or managerial computer. Within one week of data collection, this tool provided clinical nurses and administrators a variety of details such as demographic data, risk assessment, interventions, and the stage and location of ulcers found and on which unit the ulcers originated. The electronic system has provided consistent and appropriate real-time analyses for internal (Figure 2.) and external reporting and is also a reliable indicator for evaluating nursing practice. The timely availability of the pressure ulcer data enables earlier identification and implementation of prevention strategies to ultimately reduce the incidence of pressure ulcers.

Figure 1. Electronic Pressure Ulcer Data Collection Tool

Unit (NOTE: Displays your unit.)

Length of Stay

Demographics

Incontinence

Braden Scale

Interventions

Restraints

Ulcers

NOTE: This orange bar shows the coded values that are to be placed in each column. Explanations are given for each.

NOTE: This light blue area tells what information is being collected in each.

NOTE: To view summaries for your unit, refer to the bottom of your sheet. There is a red bar. This includes the summaries for each column. Results will be either numeric (as %, count or mode) or an explanation will be provided.

NOTE: The entire table moves horizontally. Use scroll for illustration.

NOTE: Remember, if ever in doubt, always leave the space blank. Info can be acquired from raw data sheets if necessary.

NOTE: Hover over red arrows.

NOTE: Values are 1-5 (unstageable). If unknown or missing, leave blank.

NOTE: Please place only a numeric character here. 31= other, but there is no need to indicate exact location in text format.

NOTE: Acronym for your unit.

for help/questions contact:

Figure 2. Example Table of Pressure Ulcer Data

Summary		Demographics			Incontinence			Restraints	BS	Ulcers				Staging				
MONTH	Total No. Pts. Evaluated	Age	Male	Female	Urinary	Foley	Fecal	Restraints	Braden Scale on Admit?	Total HA PU	No. w/in 48 hrs.	Incidence	Prevalence	Stage 1	Stage 2	Stage 3	Stage 4	Unstageable
Jan	41	57	16	25	6	5	3	0	40	0	0	0.00	0.00	0	0	0	0	0
Feb	33	66	20	13	1	14	8	2	33	0	0	0.00	0.03	0	1	0	0	0
Apr	27	60	12	15	1	13	5	0	24	0	0	0.00	0.04	0	0	0	0	0
May	41	63	18	23	3	8	5	0	0	0	0	0.00	0.02	0	0	0	0	0
Jun	41	63	18	23	1	14	4	0	0	1	0	0.02	0.02	0	1	0	0	0
Jul	41	60	24	17	3	16	6	0	37	0	0	0.00	0.00	0	0	0	0	0
Aug	36	56	23	13	2	6	0	0	32	0	0	0.00	0.03	0	0	0	0	0
N=	367	60	181	186	27	116	40	4	225	4	1			0	4	0	1	0
%	Cumulative →		49%	51%	7%	32%	11%	1%	61%	0.01	0.00	0.01	0.01	5	5			
Stage I-V Stage II-V																		

MEASURES OF CLINICAL EXCELLENCE

The National Database of Nursing Quality Indicators (NDNQI) is a repository of unit specific nursing sensitive data from hospitals across the United States. NDNQI evaluates the data and reports trends. In 2007-2008, MMC collected data monthly from 15 nursing units across the organization in accordance with the definitions and standards set forth by NDNQI. The data collected consists of: (1) nursing structure; (2) nursing process, such as risk assessments and protocol implementation; and (3) patient outcome indicators. The 15 nursing sensitive quality indicators (Box 1) provide a comprehensive approach to evaluating quality. MMC compares favorably with national nursing benchmarks. The Center's nursing analyst and site coordinator, organizes the data collection, submission, dissemination, and interpretation of the quarterly reports to the nursing staff.

Box 1. Current NDNQI Nursing Sensitive Quality Indicators

<ul style="list-style-type: none"> • Nursing Hours /Skill Mix • Assault/Injury Rate • Falls /Injury Rate • Pressure Ulcer Prevalence • Nosocomial Catheter Associated UTI • Nosocomial Central Line Associated Bloodstream Infection 	<ul style="list-style-type: none"> • Nosocomial Ventilator Associated Pneumonia • Nurse Turnover Rate • Pain Assessment • Peripheral IV Infiltrations • Restraint Prevalence • RN Education /Certification • RN Satisfaction
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The NDNQI database has provided MMC a means of benchmarking facility performance. The nursing analyst works with the Center for Performance Improvement (CPI) analyst to post the benchmark data on the Nursing Balanced Scorecard for comparison with internal data on specific indicators. The benchmarking data is utilized to determine which outcomes must be improved, to identify where to focus resources, to measure progress, and to plan next steps. MMC is at the national rate or better on most indicators. In 2007-2008, five new indicators were developed and added to the NDNQI database: (1) RN Voluntary Turnover; (2) Restraints and Nosocomial Infection; (3) Catheter Associated Urinary Tract Infections; (4) Ventilator Associated Pneumonias and (5) Central Line Associated Blood Stream Infections.

The Maine Quality Forum (MQF) is a state agency with the mission to advocate for high quality health care and help each Maine citizen make informed health care choices. Its task is to coordinate the efficient collection of nursing sensitive indicators for the assessment of the health care environment. All Maine hospitals have been required to participate in data submission since October 2005. Fifteen nursing units across the organization contribute data on nine nursing sensitive quality indicators on a quarterly basis (Box 2). The nursing analyst coordinates data collection, review and submission to MQF. Each indicator is collected with adherence to the MQF standards.

Box 2. Current NDNQI Nursing Sensitive Quality Indicators

- | | |
|---|---|
| <ul style="list-style-type: none"> • Nursing Hours /Skill Mix • Falls /Injury Rate • Pressure Ulcer Prevalence • Nosocomial Central Line Associated Bloodstream Infection | <ul style="list-style-type: none"> • Nosocomial Ventilator Associated Pneumonia • Nurse Turnover rate • Restraint Prevalence |
|---|---|

QUALITY TOOLS

Data collection tools are essential for measuring patient safety and employee performance. A vital part of quality monitoring is implementing a reliable method to monitor nursing practice documentation. The Chart Audit Tool has been streamlined to reflect the priorities of the National Patient Safety Goals, Regulatory Standards of Practice, and internal performance expectations. Guidelines for each practice item (e.g. pain assessment) standardized the data collection process and increased the reliability of the data. The tool has been designed so that it can be scanned for efficient and accurate data entry and analysis. The nursing analyst coordinated the tool development in accordance with practice priorities, and collaborates with CPI analysts to process the data, design reports and post data onto the Nursing Balanced Scorecard.

The Raw Data Bank is a user-friendly database developed in 2006 to store unit-based nursing sensitive quality indicators. Today the Raw Data Bank includes data for 28 patient care areas (i.e. R1, R3, R4, R5, R6, R7, R9, ACCU, ASU, BBCH, CTICU, CICU, Dialysis, ED, ENDO, FBC, First Care, Gibson, NICU, OPD, OR, PACU, Pain Care, P3CD, P6, SCU, SSU). The current indicators are listed in Box 3. It is a tool that facilitates collection for NDNQI or MQF.

Box 3. Current Indicators Stored in the Raw Data Bank

- | | |
|--|---|
| <ul style="list-style-type: none"> • Assaults/ Injuries • Central line Days • Medication Labeling • Restraints | <ul style="list-style-type: none"> • Sites Marked • Time Out • Tissue Implants • Urinary Catheter Days • Ventilator Days |
|--|---|

NURSING BALANCED SCORECARD

A key measurement in Magnet environments is easy access to nursing sensitive indicator data and other performance measures. The Department of Nursing is proud of their comprehensive, balanced scorecard consisting of 21 indicators organized into five categories:

1. Quality
2. Patient Satisfaction
3. Staff Satisfaction
4. Financial
5. Research

The nursing analyst coordinates the data collection, submission, and collaborates with the CPI analysts for design of reports and validation of data. She ensures all leadership and staff nurses have access to the following scorecards: Performance Improvement, Nursing, and Joint Commission. The scorecards have provided nurses with efficient, easy-to-access and readable reports for the identification of links between nursing care and patient outcomes. The scorecards are available to all leadership and nursing staff, from any campus and from any computer, including clinical workstations. The graphs of indicators are color coded for easy comparison of benchmarks/targets and printing capability to communicate and share unit specific data. The reports reveal steady improvements in 14 of 21 quality indicators.

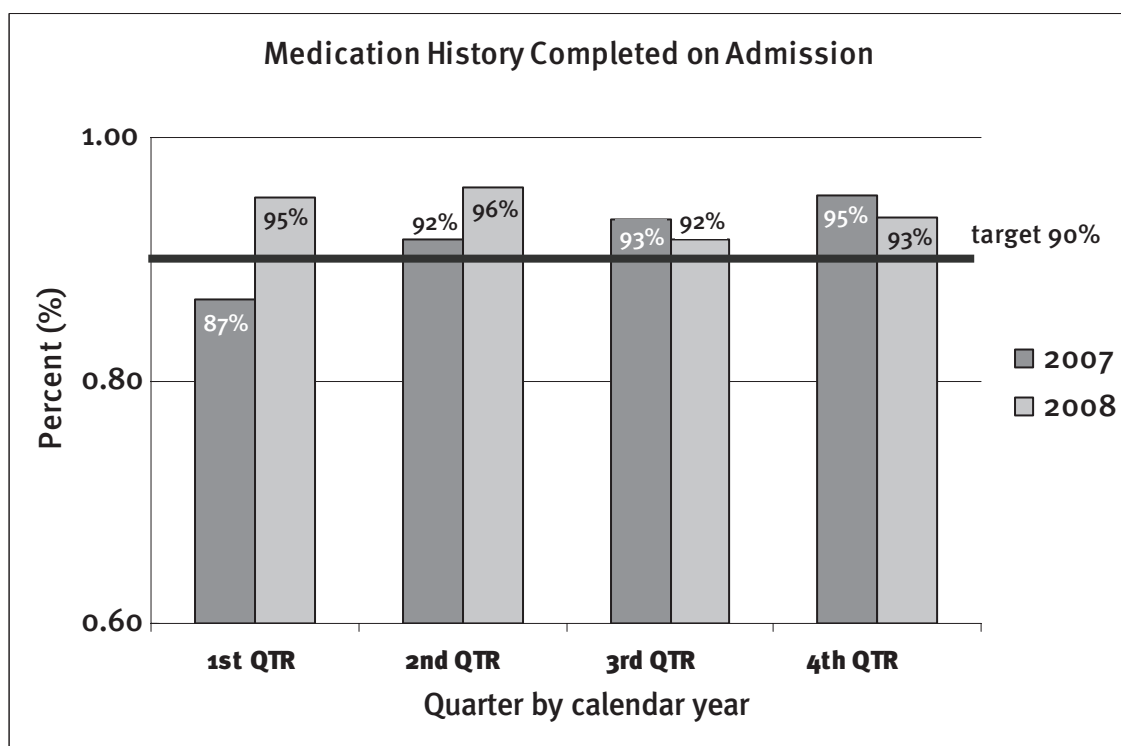
The scorecard is continually updated to add or delete indicators to reflect the practice environment and its priorities. In 2007-2008, five new indicators were added: (1) Inpatient Falls with Harm, (2) Braden Scale Assessments, (3) Organ Donation/ Transplant, (4) RN Certification, and (5) Research/Quality projects. The research nurse coordinator collects and reports the number of research projects during the quarter for the scorecard. The research indicator captures all the current research activities on any given nursing unit, in other MMC departments, and outside MMC facilities.

NURSING QUALITY AND SAFETY

The Nursing Clinical Quality Council made significant strides in leading the organization to meeting the 2007 National Patient Safety Goals. Each nursing unit received a list of unapproved abbreviations, and the list of “Dangerous Abbreviations – Do Not Use” for each bedside chart station to help nurses to use correct documentation. This past year, nurses have improved significantly from an overall 50% to 72% of charts without dangerous abbreviations. Two units achieved the target of 90% and greater.

Medication Reconciliation was addressed by moving the medication history from the patient’s admission form to a separate form developed to include admission, transfer and discharge reconciliation. The Nursing Practice and Nursing Clinical Quality Council nurses collaborated to improve adherence with obtaining a medication history on all patients admitted. The target of 90% has been consistently met for 16 inpatient units since the second calendar quarter 2007 (Figure 3.). A comprehensive medication history is a critical first step to accomplishing medication reconciliation. The nurses contributed to the success of medication reconciliation at admission and discharge by partnering with physicians. Admission reconciliation in December 2008 was 84%, and 83% for discharge reconciliation. The nursing analyst coordinates the reporting of data to the Nursing Practice and Nursing Clinical Quality Council nurses and engages staff in discussions to identify strategies to achieve success.

On November 5, 2007, the Medication Reconciliation Team hosted representatives from the Institute for Healthcare Improvement (IHI) who visited MMC for a discussion about MMC’s progress and challenges in implementing medication reconciliation. This was part of IHI’s Fall Harvest Tour, a two-week expedition to one hospital in each of the 50 states. Twenty-five physicians, nurses, and pharmacists represented MMC at the meeting. In addition, other Maine hospitals sent representatives to learn from MMC’s achievements. The nursing analyst described the community initiative on Long Island in September 2007 in which the Magnet, Marketing & Communications Council educated residents about the importance of maintaining an updated medication history. The IHI representative wrote, “Throughout our visit, it became evident how committed everyone at MMC is to making quality improvements and providing the best possible care. Maine Medical Center is certainly championing safer health care.”

Figure 3. Adherence with Obtaining Medication History

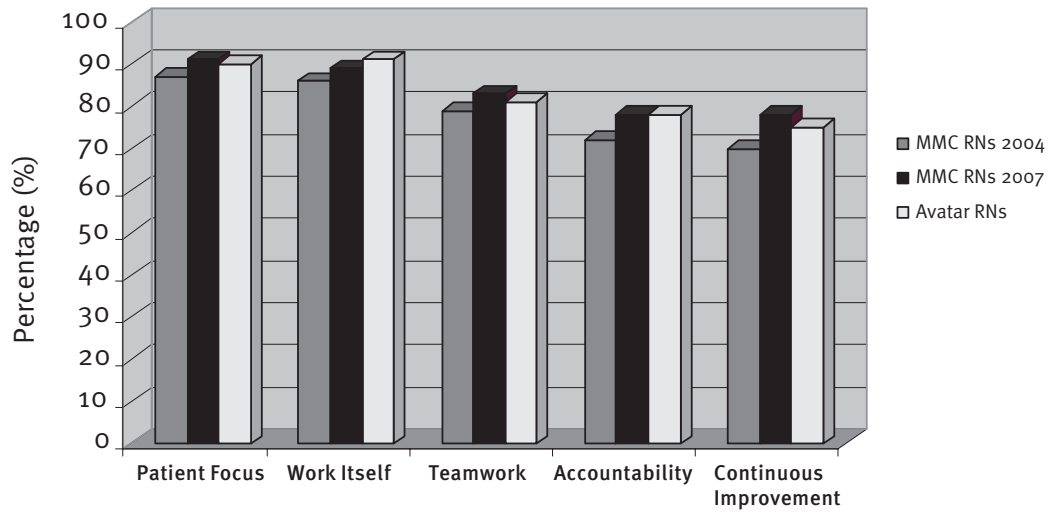
NURSE SATISFACTION

In February 2007, 961 out of 1,523 direct care nurses participated in the Avatar Employee Satisfaction Survey, which is a response rate of 63%. The nursing analyst joined the Avatar Employee Survey Task Force to participate in the planning, marketing and implementation of the 2007 survey. She and the Center Director created a crosswalk between the NDNQI and Avatar surveys to determine the comparability of questions. Following the survey, there was a significant amount of coordination with Avatar to sort the survey results by nursing unit, direct care RNs, and comparisons between 2004 and 2007. These specific measures assist in prioritizing strategies for improvements specific to the work of nurses on the respective units.

HIGHEST OVERALL SCORES

The nursing satisfaction survey helps to ensure that management has concrete evidence of nurses' job satisfaction level. The Avatar survey assesses 17 various factors that are important to professional practice. Bedside nurses demonstrate satisfaction at or above the national mean in 15 of 17 factors. The reports reveal steady improvement with all 17 factors. Avatar provides not only data at the hospital unit level but also comparison data from nurses at other hospitals. The factors that showed the highest overall satisfaction with the nurses' practice environment are in five areas: (1) Patient Focus (91%); (2) Work Itself (89%); (3) Teamwork (83%); (4) Accountability (78%); and (5) Continuous Improvement (78%). The overall nurses' satisfaction has had a positive increase in each year a survey has been conducted. (Figure 4)

Figure 4. Nurses Satisfaction 2007
Avatar Survey Results



Recognition

LOCAL AWARDS AND HONORS

In May 2007 and 2008, the Center was pleased to present the 2nd and 3rd annual Evidence Based Practice and Nursing Research Awards. The independent and blinded reviewers gave equally high scores to two research projects in both years and thus two research awards were given to these clinical scholars in 2007 and 2008.

- Kelly Lancaster, RN, BSN, CAPA for her work titled, Does Early Administration of Oral Analgesia Following General Anesthesia Effect the Occurrence of Post-op Nausea and Vomiting, Level of Pain and Length of Stay in Ambulatory Surgery Patients? (May 10, 2007)
- Barbara Winship, RN, BSN and Paulette Gallant, RN, MSN for their project titled: Use of the On-Q Pain Relief System in Post Operative Cardiac Surgery Patients (May 10, 2007)
- Jane Cleaves, RN, BSN and Peggy Doliner, RN, BSN for their project titled: An Inpatient Trial of My Health Care Journal (May 8, 2008)
- Deb Kramlich, RN, BSN, CCRN for her work titled: Families' Lived Experiences of the Resuscitation of a Loved-One (May 8, 2008)



*Jane Cleaves, RN and Peggy Doliner, RN
Recipients of Nursing Research Awards - 2008*

RESEARCH GRANTS

Kramlich, D., RN, BSN, CCRN. Families' Lived Experience of the Resuscitation of a Loved One. Sigma Theta Tau International's Kappa Zeta Chapter. Amount funded: \$500.

Lacombe, P., RN, BSN and Benson, S., MD. An Observational Study on the Use of Contrast in the Salvage of Stage IV/V Chronic Kidney Disease. Medical Research Committee. Amount funded: \$3,000.

Keane, K., RN, BSN, CCRN. Validity and Reliability of the Critical Care Pain Observation Tool (CPOT): A Pilot [Replication] Study. American Association of Critical Care Nurses. Amount funded \$ 500.

Morse, C., RN, BSN & Knutson, J., RN, BSN. Nurses' Vascular Assessment of the Post Surgical Infrainguinal Bypass Patient Comparing Ankle Brachial Index (ABI) to Pulse Palpation/Doppler. Society of Vascular Nurses, amount funded: \$1,000.

O'Brien, C., RN. A Comparison of Treatment Options for Oral Mucositis in Head and Neck Radiation Oncology Patients. Mentored Research Committee, MMCRI, amount funded: \$2,429. EKR Therapeutics Inc., amount funded: \$21,648.

Dr. Kristiina Hyrkäs was part of the team with John Devlin, MD that successfully applied for CSSP funding for the project entitled: Improving Patient Outcomes through a Systems Approach to the Management of Hyperglycemia. The other CSSP program team members are: Robert Kramer, MD and Mirle Kellett, MD (Cardiac Services), Thomas Van der Kloot, MD (Critical Care), Richard Sullivan, MD (Neurosciences) and Jens Jorgensen, MD (Vascular). The funding for this three year project is \$ 373,072.

Majorie S. Wiggins, RN, MBA, DNP_(C), NEA-BC received \$150,000 from the Hearst Foundation and \$50,000 from Bank of America for the Medication Adherence and Medication Access projects. The commitment of education and resources for these initiatives is important to realizing partnership care delivery in practice.

Education

ANNUAL CLINICAL SCHOLAR PROGRAM

In 2007 and 2008, the Center was pleased to offer the Clinical Scholar Program to health care practitioners within Maine Medical Center as well as to nurses from other Maine-Health facilities. There were representatives from Mid Coast Hospital in Brunswick (12), Miles Memorial Hospital in Damariscotta (1), Maine General Hospital in Augusta (3), Southern Maine Medical Center in Biddeford (4), Stephens Memorial Hospital in Norway (18) and the HomeHealth Visiting Nurses of Southern Maine (1). One St. Joseph's College faculty member attended the workshops.

The curriculum was changed to reflect the varying needs and interests of staff. EBP 101 included practical and general information on evidence based practice (EBP) and research. The content was designed for health care practitioners wishing to become users of EBP and included an introduction to literature searching, critiquing and evaluating levels of evidence, research designs and terminology, and an overview of the role of the Institutional Review Board (IRB). EBP 201 built upon EBP 101. This was the research portion of the program and was designed for those nurses wishing to conduct a research project. The content presented included proposal writing, data collection, fundamental statistics, writing an abstract, and an introduction to PowerPoint and public speaking. Bruce MacMillan, BA, MS presented a session on "How to Polish your Public Speaking." In 2008, this session also included a portion regarding a scholarly presentation at a poster. The research mentors paired up with the attendees to design and carry out their research projects. In 2007, 91 practitioners attended EBP 101 and 60 completed the entire series of workshops. On July 6, 2007, the attendees made 14 podium and 17 poster presentations. In 2008, enrollment was capped to allow for more intensive time with the research mentors. Thirty-six practitioners started EBP 101 and 34 completed the entire series. On July 11, 2008, the attendees made eight podium and nine poster presentations.



2007 Clinical Scholar Program Graduates

In 2007, the opening keynote presentation made by Dr. Judith Spross from the University of Southern Maine (USM), was Creating and Sustaining Evidence Based Practice: Strategies for Enhancing Individual Commitment and Institutional Capacity. In 2008, Dr. Patricia Ebright from University of Indiana opened the Clinical Scholar Program with the keynote presentation Nursing Work Complexity: Implications for Implementing and Sustaining Best Practices. As always, the last workshop was comprised of presentations by the new Clinical Scholars and a celebration of their accomplishments.



Dr. Patricia Ebright, Keynote Speaker at 2008 Clinical Scholar program

QUALITATIVE RESEARCH METHODS AND DATA ANALYSIS

An increasing number of nurses expressed an interest to conduct research using qualitative research methods. Bonnie Cashin-Farmer, PhD, RN, Assistant Professor of Nursing at USM, made two visits to MMC during the summer of 2007 to provide an overview of qualitative data analysis methods, introduce nurses to her research experiences, and the use of the data analysis software, NVivo.

In the fall of 2007, the Center presented a two-day workshop focused on qualitative research. While qualitative research is briefly described in the Clinical Scholar Program, these sessions provided an opportunity for a much more detailed exploration of its methodology. John Cutcliffe, RMN, RGN, RPN, RN, BSc (Hon) Nrsgr., PhD, Professor of Nursing from the University of Texas at Tyler presented this two-day workshop to 20 attendees.

PUBLISHING WORKSHOPS

In 2007, the Center organized Writing for Publication and Your Name in Print, a two-day workshop on the publication process. It was designed to help nurses engaged in research activities to disseminate their findings in professional nursing publications. The content included journal selection, writing process and strategies, manuscript preparation, submission and editing. Leslie Nicoll, PhD, MBA, RN-BC was the presenter. She is the Editor-in-Chief of CIN: Computers, Informatics, Nursing and JHPN: The Journal of Hospice and Palliative Nursing as well as the owner of Maine Desk: Professional Editorial Services in Portland. Eighteen nurses attended and had an opportunity to consult with Dr. Nicoll on their manuscripts.

PANEL DISCUSSION

On March 23, 2007, during National Patient Safety month, the Center Director and members of the Falls Prevention Team presented an update on the changes that were underway to lower the incidence of falls. They described the multi-pronged approach to the development of a new program which included the selection of a new risk assessment tool.

FALLS SYMPOSIUM

On April 11, 2008 the Center and the Falls Prevention Committee hosted a Falls Symposium (Table 3). This event was targeted to all MMC employees. The keynote speaker was Leanne Currie, RN, DNSc, who is the author of the New York Presbyterian Fall and Injury Risk Assessment Scale which was adopted for use at MMC in 2008.

Table 3. Falls Symposium Presentations

Title of the presentation	Presenter
Welcome & Opening Remarks	Joanne Chapman, RN, BSN, MSN, M.Ed, NE-BC Doug Salvador, MD Maine Medical Center
Keynote Presentation: Automated Fall-Injury Risk Assessment	Leanne Currie, RN, DNSc, Assistant Professor of Nursing, Columbia University School of Nursing Nurse Researcher, New York-Presbyterian Hospital, NY
Assessing Fall Risk Across the Continuum of Care	<div> <div>Pediatrics-Adult –</div> <div>Debra Kramlich, RN, BSN, CCRN Joanne Chapman, RN, BSN, MSN, M.Ed, NE-BC Deborah Bachand, RN Kristiina Hyrkäs, RN, MNsc, LicNSc, PhD Kathy Nadeau, RN, APRN-BC</div> </div> <div> <div>Geriatric – Psychiatric –</div> <div>Donna Libby, RN Joyce Haas, OT</div> </div> <div> <div>Outpatient –</div> <div>Susan Fielding, RN, NP Maine Medical Center</div> </div>
Preventing Falls & Injury: Interventions & Maximizing Clinical Judgment Panel Discussion	Moderator: Debra McPherson, MSN, RN Leanne Currie, RN, DNSc Kathy Nadeau, MS, APRN-BC Wendy Osgood, PT/OT Lisa Wendler, PharmD
Unifying Fall Prevention Across the State of Maine	Joel Botler, MD Maine Medical Center
Risk Management & Regulatory Issue	Julie Marston Katherine Dempski Maine Medical Center

CONNECTION TO ACADEMIA

The community connection through universities was ongoing during 2007 (Table 4). The Center staff presented content on the different types of research and quality projects at MMC and the dissemination of the findings. Research methods and study designs were a focus of some of the Graduate level class sessions while the content of the Clinical Theory class focused on the essential concepts of nursing, and specifically on the concept of humor. The Center Director had contributed a chapter on humor to John Cutcliffe's book: *The Essential Concepts of Nursing*.

Table 4. Teaching at Universities

Course	University	Date	By Whom	Contact
Research NUR 604	USM	March 14, 2007	Hyrkäs, K.	Dr. Judy Spross
Research NUR 604	SJC	June 8, 2007	Hyrkäs, K. Palmer, D.	Debra Rindeau
Clinical Theory	USM	October 16, 2007	Hyrkäs, K.	Laurie Caton-Lemos
CON/Health Related Research	USM	November 14, 2007	Hyrkäs, K. Dende, D.	Dr. Chris Scott
Research	UNW	November 15, 2007	Hyrkäs, K. Dende, D.	Jennifer Morton
CON/Health Related Research	USM	September 19, 2008	Hyrkäs, K.	Dr. Chris Scott
Research	UNE	November 4, 2008	Palmer, D. Parisien, C.	Jennifer Morton

Additionally, the Center Director provided several mentoring opportunities for nursing students to work onsite and participate first hand in hospital initiatives under her supervision. Summer interns from USM's undergraduate nursing program helped with data entry on current projects. A master's degree student from the University of New Hampshire completed his master's degree thesis and Capstone Project (N955) with foundational work on the focus group interviews related to hyperglycemia management.

Finally, a candidate for a doctorate in nursing practice from the Massachusetts General Hospital/MGH Institute of Health Professions completed her research practicum (DNP 870) by supporting the Center's research on the impact of partnership rounding.

On July 30, 2007, USM invited the Center Director to be a reviewer for faculty appointments and promotions. She has so far reviewed the qualifications of a candidate for early tenure and promotion as an associate professor.

In 2008, the Center Director became a Master's Thesis Supervisory Committee member for a student (MMC staff) at the University of New Hampshire. She also became a doctoral committee member at the Rocky Mountain University for Health Professions (Utah) for a St. Joseph's College faculty member. She was a supervisor for a clinical nurse specialist student (MMC staff) at USM during a semester long advanced practice course in Medical-Surgical Nursing (NUR 644). She was a preceptor of the Teaching in Nursing and Healthcare Practicum for a master's level student (MMC staff) at Saint Joseph's College (NU647). As of the fall semester 2008, she began mentoring three USM CNL students on their projects (MMC and Spring Harbor staff). Also during the fall, she participated in the USM interview process for a new dean for the College of Nursing and Health Professions.

CONSULTATIONS AND MENTORING

Magnet organizations are strong advocates of mentoring for the advancement of the nursing profession. Through mentoring activities, Magnet organizations support other organizations as they commit to the Magnet philosophy and make changes in the practice environment. The mentoring experience can be quite rewarding as the organization can benefit from an exchange of ideas and approaches. MMC has participated in 17 various mentoring activities representing a significant time commitment to consultation since our designation in May 2006. MMC staff has contributed to informal discussions with individuals and groups including six formal presentations on topics ranging from Magnet Journey Kick-off to Evidence based Practice and Research in the Magnet Environment. These mentoring activities are summarized in Table 5.

Table 5. Mentoring Activities in 2007-2008

Hospital or Event	Date	Content
Fletcher Allen Hospital Burlington, VT	October 26, 2007	NDNQI data entry for pressure ulcers (risk assessment vs. staging) – review & clarify guidelines (C. Parisien)
11th National Magnet Conference - 2007 Atlanta, GA	October 5, 2007	Meeting; Magnet Process: Japanese Nurse Researchers (C. Parisien & D. Palmer)
Mercy Hospital Portland, ME	September 27, 2007	Maine Magnet Networking Collaborative Planning meeting (C. Parisien)
Maine Magnet Networking Collaborative, Augusta, ME	October 19, 2007	Meeting at the ANA Annual meeting; Panel discussion Re: Magnet Journey (C. Parisien)
	November 8, 2007	Meeting at the Maine Hospital Association Office; Review survey data, schedule 2008 meetings (C. Parisien)
Mercy Hospital Portland, ME	March 9, 2007	Informal presentation at Mercy – Magnet journey Shared governance – Councils (M. Wiggins & C. Lord)
Mid Coast Hospital Brunswick, ME	October 4, 2007	Informal discussion at the 11th National Magnet Conference; shared governance & Magnet action team (C. Parisien)
	September 10, 2008	Correct ECG electrode placement and lead selection to optimize cardiac rhythm monitoring. (C. Honess)
Mercy Medical Center Baltimore, MD	July 16, 2007	Process for “Getting Started” Gap Analysis; Magnet Steering Committee; Magnet Action Team; Magnet Committee Agenda/Minutes Journey Order of Events (C. Parisien)
Southern Maine Medical Center (SMMC) Biddeford, ME	May 7, 2007	PowerPoint presentation Kick-off Magnet journey (C. Lord)
	September 6, 2007	Meeting at MMC: Overview of NDNQI; application; data collection tools; data entry; site coordinator role; tools to organize units by NSIs (nursing sensitive indicators); reports (C. Parisien)
	October 17, 2007	NDNQI unit designation; NSIs; unit assessment for data availability; data contributors (C. Parisien)
	October 26, 2007	Request a unit enrollment worksheet (C. Parisien)
	December 13, 2007	NDNQI data submission; pain, PIV (peripheral intravenous infiltration indicator), falls & tools (C. Parisien)
	December 19, 2007	NDNQI data submission: turnover (C. Parisien)
	August 28, 2008 November 3 & 19, 2008	Site visit & expansion of the Partnership Rounding research project to SMMC (K. Hyrkas & D. Bachand)
Central Baptist Hospital Lexington, KY	November 19, 2008	Site visit by two nurses interested in establishing partnership rounding in their facility (K. Hyrkas, D. Bachand, S. Colello, B. Grant, R. Babine, D. Dende, L. Burton, D. Tabor, J. Willson)
SMMC Biddeford, ME	February 11, 2008	NDNQI data submission – turnover (C. Parisien)
Maine Magnet Networking Collaborative Augusta, ME	February 7, 2008	Meeting at Maine Hospital Association Office. Presentation on gap analysis (C. Parisien)
	May 1, 2008	Meeting at Maine Hospital Association Office. Presentation on shared governance model (C. Parisien)
	September 4, 2008	Meeting at Maine Hospital Association Office. Presentation on engaging staff (C. Parisien)
	November 6, 2008	Meeting at Maine General Hospital, Augusta, ME. Conference call presentation on peer review process (C. Palleschi, C. Lord)
Memorial Hospital Belleville, IL	February 28, 2008	Shared governance model; how we do quality work; quality audit tool; Practice & Quality Council (C. Parisien)

The Center is a resource for many organizations. It is often consulted on topics ranging from What Is Evidence Based Practice, How to Create and Sustain Evidence Based Practice, to specific questions regarding research methods and instruments. The Center offered consultation to several organizations and institutions which are listed in Table 6.

Table 6. Consultations in 2007-2008

Organization	Date	Content
New England Rehabilitation Hospital, Portland, ME	May 24, 2007	Falls Risk Assessment Study & Tools (K. Hyrkäs)
PenBay Medical Center Rockland, ME	May 3, 2007	Presentation: EBP & Pediatric Pain (K. Hyrkäs K. D. Kramlich)
St. Mary's Hospital Lewiston, ME	May 9, 2007	Starting a Research/EBP program (K. Hyrkäs & D. Palmer)
Stephens Memorial Hospital Norway, ME	April 4, 2007	Presentation: EBP and Pediatric Pain (K. Hyrkäs, D. Kramlich, D. Palmer)
University of Maine Orono, ME	August 1, 2007	Starting a Research/EBP Program (K. Hyrkäs & D. Palmer)
Mayo Regional Hospital Dover-Foxcroft, ME	August 25, 2008	The use of the New York Presbyterian Falls risk assessment tool (K. Hyrkäs)
University of New England (UNE) Department of Physical Therapy & Occupational Therapy	November 26 & December 18, 2008	Planning a collaborative research project(s) with faculty at UNE and MMC (K. Hyrkäs)
Mid Coast Hospital Brunswick, ME	December 18, 2008	SPSS use in monitoring and processing internal data (K. Hyrkäs & K. Harvey)

LOCAL PODIUM AND POSTER PRESENTATIONS

The Maine Nursing Summit, an annual conference sponsored by the American Nurses Association, Maine (ANA-ME), is always well attended by MMC nurses. It provides a good opportunity to exchange information with nurses throughout the state. The Summit is held in Augusta each year. In 2007 and 2008, MMC nurses made a number of podium and poster presentations throughout Maine. (Table 7).

Table 7. Local Research Presentations

Presenters	Title of Presentation	Podium	Poster
Chapman, J.; Dolan, D.; Hyrkäs, K.	Pilot testing the sensitivity, specificity and reliability of four fall risk assessment tools (Maine Nursing Summit, 2007)		X
Flewelling-Goran, S.	The eICU: A Collaborative and Mentoring Model (Maine Nursing Summit, 2007)	X	
Honess, C.; Lord, C.	Therapeutic Hypothermia after Cardiac Arrest (Maine Nursing Summit, 2007)		X
Irish, D.	Patients Education (Maine Nursing Summit, 2007)		X
Lancaster, K.; Palmer, D.	Renewing the Spirit of Nursing by Embracing Evidence Based Practice. (Eastern Maine Community College, Bangor, ME, April 4, 2008)	X	
Lord, C.; Call, K.; Grant, B.; Nayak, S.	Transforming Nursing Leadership at the Bedside Through Empowerment & Shared Governance (Maine Nursing Summit, 2007)	X	
Lord, C.; Bradford, M.; McPherson, D.	Mentoring: Bridging the Gap from Novice to Expert (Maine Nursing Summit, 2008)		X
Nayak, S.; Tack, C.	Bridging Cultural Gaps: Integrating Workforce and Community (Maine Nursing Summit, 2007)	X	
Palleschi, C.	ST Segment Monitoring Augusta, Me. March, (Maine Nursing Summit, 2008)		X
Palmer, D.	Research and Evidence based Practice Beliefs and Barriers: A Statewide Survey of Nurses (Maine Nursing Summit, 2007)	X	
Palmer, D.	The Nuts and Bolts of Getting Started in Research. (Annual Dr. Cox, Mud Season Conference, Portland, ME, April 4, 2008)	X	
Palmer, D.	Renewing the Spirit of Nursing by Embracing Evidence Based Practice. (Eastern Maine Community College, Bangor, ME, April 4, 2008)	X	
Palmer, D.; Hyrkäs, K.	State of the State Address on Evidenced Based Practice: One Organizations Approach for Moving Evidence into Practice (OMNE, 2007)	X	
Parisien, C.; Harvey, K.	Strategies for Effective Data Collection & Entry for Unit Based Nursing sensitive Quality Indicators (Maine Nursing Summit, 2008)	X	
Parisien, C. et al.	Developing Maine Magnet Networking Collaborative (Maine Nursing Summit, 2008)		X
Robert, JA.; Dann, E.; Nesbitt, M.	Improving Patient Safety with a Chemotherapy Verification Checklist (Maine Nursing Summit, 2007)		X
Varnum, A.	Walking Rounds in the ED (Maine Nursing Summit, 2008)	X	

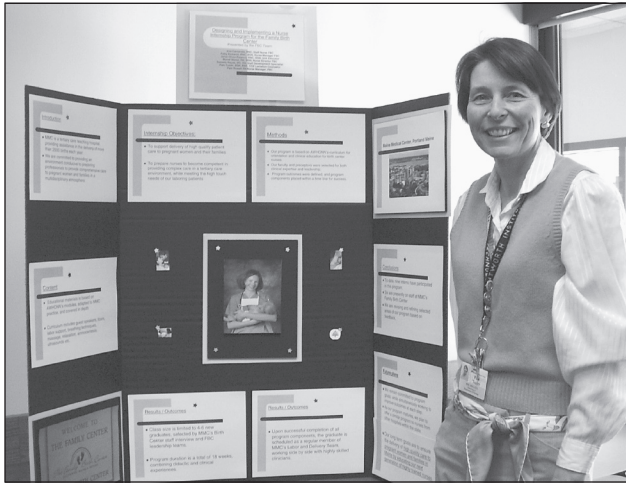
On September 14, 2007 the Director and Research Nurse Coordinator gave a presentation to the Organization of Maine Nursing Executives (OMNE) in Augusta. Their presentation was a “State of the State” address on where Maine is regarding EBP and included results of the statewide survey regarding nurses’ perceptions of the barriers and facilitators to evidence based practice. This was a good opportunity to create a dialogue toward the expansion of nursing research in Maine.

RESEARCH FORUMS IN 2007 AND 2008

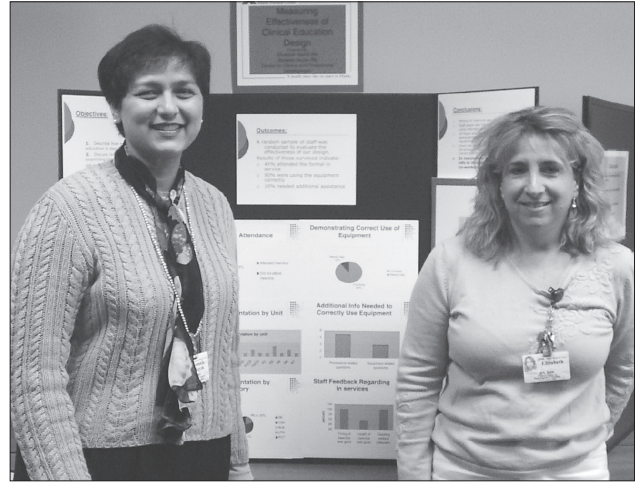
Each year MMCRI presents The Research Forum, a week-long event for many different disciplines to showcase their research. The planning committees in 2007 and 2008 were composed of: Dr. Kenneth Ault (07/08), Dr. Carl Bredenberg (08), Dr. Kathleen Fairfield (07/08), Dr. Robert Friesel (07), Dr. Michael A. Gibbs (07/08), Dr. Kristiina Hyrkäs (07/08), Dr. Lucy Liaw (08), Louise I. Marcotte (07/08), Dr. Daniel I. Spratt (07/08), Tania Strout (07/08) and Jan Trott (07/08). The Research Forum has been held each May with a full day’s session dedicated to nursing research. There were 18 presentations: seven podium and eleven poster in total for 2007 and 2008. (Table 8).

Table 8. Research Forum Presentations

Presenter/Authors	Title of Presentation	Podium	Poster
Babine, R.; Fortin-Shoemaker, R.; Honess, C.	A Comparison of Nitroglycerine Ointment Application Methods to Enhance Vasodilatation: Application Paper versus Plastic Wrap (2008)		X
Baston, G.; Reese, S.	Pediatric Pain Assessment and Nurses’ Knowledge and Attitudes Regarding Pediatric Pain in an Ambulatory Care Setting (2007)		X
Chapman, J.; Dolan, D.; Hyrkäs, K.	Pilot Testing the Sensitivity, Specificity and Reliability of Four Falls Risk Assessment Tools (2007)		X
Coyne, C.; Hopkins, E.; Kent, T.; Mullen, D.	Use of Berlin Questionnaire in an Outpatient Setting to Screen Adult Patients for Risk of Sleep Apnea (2008)		X
Gallant, P.	Using a Collaborative Interdisciplinary Team to Implement & Evaluate a Hyperglycemic Protocol from Admission to Discharge in the Cardiac Surgery Patient (2007)	X	
Kramlich, D.	Effect of Implementation of the FLACC Score on Documentation of Pediatric Pain Assessment (2007)		X
Kramlich, D.	Development of Guidelines for Family Support during Resuscitation of a Loved One (2008)		X
McCluskey, T.; Whiting, T.	Nosocomial Central Line Infection Rates in Pediatric Oncology Patients (2007)	X	
Morgan-Moore, L.	Variant Creutzfeldt-Jacob Disease: the Effect of Genetic Expression on Transmission (2008)		X
Morse, C.J.; Knutson, J.	Nurses’ Vascular Assessment of the Post Surgical Infrainguinal Bypass Patient Comparing Ankle Brachial Index (ABI) to Pulse Palpation/Doppler Signal (2008)	X	
Nayak, S.	Designing and Implementing a Nurse Internship Program for the Family Birth Center (2007)		X
Nayak, S.	Measuring Effectiveness of Clinical Education Design (2007)		X
Nesbitt, M.; Ault, K.; Hyrkäs, K.	Quality Of Life after High Dose Chemotherapy with Autologous Peripheral Blood Stem Cell Support (HDC/APBSCS) (2007)		X
Palmer, D.	Research Beliefs and Barriers: A Statewide Survey of Nurses (2007)		X
Quirk, R.	Zingo versus EMLA: Successful Management of Needle-stick Pain in Pediatric Patients (2008)	X	
Swan, N.	Telemetry Monitoring in Relation to Transport of Patients to Testing: A Descriptive-Comparative Study on R7 (2008)	X	
Tabor, D.	A Comparison of Patients Anemia with and without Stryker Drain Re-transfusion after Total Knee Replacement (2007)	X	
Winship, B.	Use of the On-Q Pain Relief System in Postoperative Cardiac Surgery Patients (2007)	X	



Pam Tozier, RN, CN III, at 2007 Research Forum



Suneela Nayak, RN, MSN and Elizabeth Merrill, RN at 2007 Research Forum

NATIONAL AND INTERNATIONAL PRESENTATIONS

There were many opportunities for MMC nurses to share their work with their colleagues in the United States and around the world in 2007 and 2008. The conferences had different foci and themes which also added new perspectives to practice for the nurses who attended. In early 2007, the Center Director gave a Keynote presentation titled: Supervision & Inter-Professional Practice: Perspectives from Literature & Research at the University of Calgary's Supervision and Mentorship for Interprofessional Practice Conference in Alberta, Canada. Later that spring, she was invited to participate in the Editor's Panel discussion organized at the Eastern Research Nurse Society's 19th Annual Scientific Session in Providence, RI. She also delivered a keynote presentation which was titled: Describing Evidence Based Practice and Strategies to Build Its Culture - Key Terms and Concepts at the Invitation to Excellence through Caring: A Celebration of Clinical Outcomes Conference at Central Baptist Hospital in Lexington, Kentucky. Also presenting at this conference in Kentucky was our Research Nurse Coordinator. Her presentation was titled: Steps to Implement EBP within a Successful Research Program. (Table 9)

Table 9. National & International Presentations

Presenter(s)/Author(s)	Title of Presentation	Conference
Babine, R.; Fortin-Shoemaker, R.; Honess, C.	A Comparison of Nitroglycerin Ointment Application Methods to Enhance Vasodilation: Applicator Paper versus Plastic Wrap (poster)	39th Biennial Convention, Sigma Theta Tau International (STTI), November 3-7, 2007, Baltimore, MD
Bergeron, D.; Hyrkäs, K.	Theory, Technology and Practice: Creating Synergy in a New Care Delivery Model. (Poster). Note: This poster was deemed the “Highest Scholarship Poster Abstract Award Winner”	18th Annual Summer Institute in Nursing Informatics 2008 (SINI), July 16-19, 2008, The University of Maryland, School of Nursing, Baltimore, MD
Chapman, J.; Dolan, D.; Hyrkäs, K.	Preventing Patient Falls. The Challenges of Predicting Patients at Fall Risk and Choosing a “Best Possible” Fall Risk Assessment Tool. (podium)	39th Biennial Convention, STTI, November 3-7, 2007, Baltimore, MD
Chapman, J.; Dolan, D.; Hyrkäs, K.	Pilot testing the Sensitivity, Specificity and Reliability of Four Falls Risk Assessment Tools. (poster)	4th Annual Florida Magnet Research Conference, February 1-2, 2007, St. Petersburg, FL
Dolan, D.; Chapman, J.; Hyrkäs, K.	Examination of Methodological and Practical Challenges to Falls Risk Assessments. 18th International Nursing Research Congress Focusing on Evidence based Practice. (podium)	18th International Nursing Research Congress Focusing on Evidence based Practice, STT, July 11-14, 2007, Vienna, Austria
Flewelling-Goran, S.	Remote Mentoring and Collaboration: A Key to Improved Patient Outcomes (podium)	ANCC 11th Annual Magnet Conference, October 3-5, 2007, Atlanta, GA
Gallant, P.	Evaluating Blood Glucose Outcomes in Cardiac Surgery Patients on a Continuous Insulin Infusion Protocol (podium)	National Teaching Institute, Atlanta, GA
Gallant, P.	Evaluating Blood Glucose Outcomes in Cardiac Surgery Patients on a Continuous Insulin Infusion Protocol (podium)	39th Biennial Convention, STTI, November 3-7, 2007, Baltimore, MD
Gallant, P.	A Collaborative Approach in Treating Hyperglycemia in the Cardiac Surgical Patients to Reduce the Risk of Deep Sternal Wound Infection. (poster)	4th Annual Florida Magnet Research Conference, February 1-2, 2007, St. Petersburg, FL
Gallant, P.; Manchester, N.; Orff-Ney, S.; Swan, N.; Tabor, D.; Wilson, L.	Pulling it all Together to Make a Smooth Transition: How the CNL Role Was Implemented at Maine Medical Center (podium)	CNL (Clinical Nurse Leader) Partnership Conference, January 17, 2008, Tuscon, AZ
Grant, B.; Collelo, S.	Rediscovering the Art of Professional Nursing through Patient Engagement	Magnet Conference, October 2008, Salt Lake City, UT
Hyrkäs, K.	Describing Evidence based Practice and Strategies to Build Its Culture - Key Terms and Concepts. (Key Note Presentation)	An Invitation to Excellence through Caring: A Celebration of Clinical Outcomes, March 26, 2007, Central Baptist Hospital, Lexington, KY
Hyrkäs, K.	Supervision & Inter-Professional Practice: Perspectives from Literature & Research. (Key Note –presentation)	Supervision and Mentorship for Inter-professional Practice, March 9, 2007, University of Calgary, Alberta, Canada
Hyrkäs, K.	The Knowledge Bank - Data bases for Nurses Conducting Research, Evidence Based Practice and QUALITY IMPROVEMENT –Projects. (podium)	4th Annual Florida Magnet Research Conference, February 1-2, 2007, St. Petersburg, FL
Kramlich, D.	Pediatric Pain Assessment and Documentation (podium)	8th Annual EBP (Evidence Based Practice) Conference, February 22-23, 2007, Phoenix, AZ
Kramlich, D.	Development of Family Presence Guidelines (podium)	National Teaching Institute (NTI), May 3-8, 2008, Chicago, IL Horizons, April 9-11, 2008, Connecticut
Morse, C.; Knutson, J.	Improving Care & Decreasing Costs through Standardized Pathway (poster)	Society of Vascular Nurses, June 6-9, 2007, Baltimore, MD
Nesbitt, M.; Ault, K.; Aronson, F.; Boyd, M.; Case, D.C.; Dugan, M.; Ebrahim, K.; Hedlund, J.; Ryan, H.; Hyrkäs, K.	Quality of Life After High Dose Chemotherapy With Autologous Hematopoietic Progenitor Cell Support Long Term Follow-Up (poster)	American Society of Hematology 49th Annual Meeting and Exposition, December 8-10, 2007, Atlanta, GA
Nesbitt, M.; Ault, K.; Aronson, F.; Boyd, M.; Case, D.C.; Dugan, M.; Ebrahim, K.; Hedlund, J.; Ryan, H.; Hyrkäs, K.	Quality of Life Survey of People Treated With High Dose Chemotherapy With Autologous Hematopoietic Progenitor Cell Support Long Term Follow-Up (poster)	Northern New England Clinical Oncology Society, October 12-13, 2007, Burlington, VT
Palleschi, C.; Kilroy, B.	Meaningful Peer Review Process Development (poster)	American Nurses Credentialing Center (ANCC) 11th Annual Magnet Conference, October 3-5, 2007, Atlanta, GA

Presenter(s)/Author(s)	Title of Presentation	Conference
Palmer, D.; Hyrkäs, K.	An Educational Program Focusing on Research and Evidence based Practice: One Hospital's Innovative Initiative for Nurses at the Bedside (podium)	2nd International Nurse Education Conference, NETNEP, June 9-11, 2008, Dublin, Ireland
Palmer, D.	Steps to Implement EBP within a Successful Research Program (podium)	An Invitation to Excellence through Caring: A Celebration of Clinical Outcomes, March 26, 2007, Central Baptist Hospital, Lexington, KY
Palmer, D.; Hewitt, H.	Institutional Research Mentoring on the Magnet Journey (poster)	ANCC 11th Annual Magnet Conference, October 3-5, 2007, Atlanta, GA
Parisien, C, Hyrkäs, K. & Reeder, S	Shifting the Perspective and Approach of Pressure Ulcer Data Collection and Entry. Our Strategy for Implementing and Maintaining Effective Data Collection for Pressure Ulcers (PU).(podium)	NDNQI (National Database of Nursing Quality Indicators), January 29-31, 2007, Las Vegas, NV
Quirk, R.	Get Them Home Safer (poster)	Building Communities of Scholarship and Research, Eastern Nursing Research Society (ERNS), 19th Annual Scientific Session, April 12-14, 2007, Providence, RI
Robert, JA., Dann, E., & Nesbitt, M.	Improving Patient Safety With a Chemotherapy Verification Checklist (poster)	Northern New England Clinical Oncology Society 2007 Annual Meeting, October 12-13, 2007, Burlington, VT
Wilson, L.	Patient Education Made a Priority – A Quality Improvement Project (poster)	CNL (Clinical Nurse Leader) Partnership Conference January 17, 2008, Tuscon, AZ
Winship, B.	Use of the On-Q Pain Relief System in Post Operative Cardiac Surgery Patients (podium)	39th Biennial Convention, Sigma Theta Tau International (STTI), November 3-7, 2007, Baltimore, MD



Dan Bergeron, BSN, RN, MPH at 18th Annual Summer Institute in Nursing Informatics 2008, Baltimore, Maryland



Joanne Chapman, RN at 39th Biennial Convention, STTI, 2007, Baltimore, Maryland

PUBLICATIONS

In 2007-2008, the Department of Nursing published 20 papers in nursing and medical journals and three papers were accepted for publication. Included in these are articles by MMC's CNLs and CNO which appeared in a theme issue of the Journal of Nursing Management. This issue, published in July 2008, was devoted to the topic of Clinical Nursing Leadership and was edited by Kristiina Hyrkäs and Denise Dende. The editors compiled the issue with manuscripts by authors from around the world and will be co-editing another theme issue of the journal for publication in April 2009. There were also two book chapters published in 2008, one in the book titled "On the Edge: Nursing in the Age of Complexity" and one in "Sustained Improvement in Nursing Quality: Hospital Performance on NDNQI Indicators, 2007-2008". (Table 11)

Table 11. Publications

Author(s)	Title	Publication
Drew, D. & Hyrkäs, K. (2007)	'Shoot for the Stars' – Evidence Based Practice and Research at Maine Medical Center.	Advance for Nurses 9 (1), 27-28.
Harvey, K. (2008)	SPSS Survival Manual: A Step-by-step guide to data analysis using SPSS version 15. Commentary.	Nurse Researcher (2009), 16 (3), 89.
Haskell, W. (2008)	Clinical exemplar: a mother's story.	Journal of Emergency Nursing 34 (3), 218-220.
Hyrkäs, K. & Dende, D. (2008)	Clinical Nursing Leadership – perspectives on current topics.	Editorial. Journal of Nursing Management 16 (5), 495-498.
Hyrkäs, K. & Dende, D. (2008)	Empowering the professional nurse to change practice with research at the patient's bedside.	Pro Health (accepted for publication in 2009)
Hyrkäs, K. & Palmer, D.	(Eds) Book of Nursing Research and Quality Projects Abstracts 2006-2007.	The Center for Nursing Research and Quality Outcomes. Maine Medical Center.
Hyrkäs, K. & Shoemaker, M. (2007)	Changes in Preceptor's role. Re-visiting preceptors' perceptions of benefits, rewards, support and commitment to the role.	Journal of Advanced Nursing 60 (5), 513-524
Kramer, R.; Groom, R.; Weldner, D.; Gallant, P.; Heyl, B.; Knapp, R.; Arnold, A. (2008)	Glycemic Control and Reduction of Deep Sternal Wound Infection Rates: A Multidisciplinary Approach.	Archives of Surgery 143 (5), 451-456.
Kemmerer, D. (2007)	Anticholinergic Syndrome.	Journal of Emergency Nursing 33 (1), 76-78.
Lancaster, K. (2007)	Early Administration of Oral Analgesia Following General Anesthesia in Ambulatory Surgery Patients.	MESPANN Newsletter
Lyden C. (2008)	From Paper to Computer Documentation: One easy step?	Online Journal of Nursing Informatics 12:3, 1-20. Available at: http://ojni.org/12_3/Lyden.htm
McPherson, D. J. (2007)	PICCs: Peripherally Inserted Central Catheters: What You Should Know.	Men in Nursing 2(6), 38-43.
Parisien, C. (2007)	MMC Nurses Receive the Excellence Recognition They Deserve.	Mainely Kapa Zeta, 15 (2).
Parisien, C.; Dende, D.; Hyrkäs, K. (2008)	Utilization of Balanced Scorecards for Improving and Monitoring the Quality Outcomes in the Magnet Hospital Environment.	Pro Health (accepted for publication in 2009)
Ponte, P.; Glazer, G.; Dann, E.; Mc.Collum, K.; et al. (2007)	The Power of Professional Nursing Practice – An Essential Element of Patient and Family Centered Care.	Online Journal of Issues in Nursing 12 (1). Available at: http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume122007/No1Jan07/tpc32_316092.aspx
Poulin, D. & Hyrkäs, K. (2008)	A Comparison of Patients' Anemia with and without Stryker Drain Re-Transfusion after Total Knee Replacement.	MEDSURG Nursing 17 (5), 317-321.

Author(s)	Title	Publication
Poulin-Tabor, D.; Quirk, R.; Wilson, L.; Orff, S.; Gallant, P.; Swan, N.; Manchester, N. (2008)	Pioneering a New Role: the Beginning, Current Practice and Future of the Clinical Nurse Leader.	Journal of Nursing Management 16 (5), 618-624.
Reeder, S.; Manchester, N.; Orff-Ney, S.; Dende, D.; Parisien, C. (2008)	Point-of-Care Education Reduces Pressure Ulcer Rates in the ICU. In N. Dunton & I. Montalvo (Eds.) Sustained Improvement in Nursing Quality: Hospital Performance on NDNQI Indicators, 2007-2008.	American Nurses Association. Silver Spring, Maryland. pp. 125-134.
Riehle, M.; Bergeron, D.; Hyrkäs, K. (2008)	Improving Process while Changing Practice: FMEA and Medication Administration.	Nursing Management 39 (2), 28-34.
Sirola-Karvinen, P. & Hyrkäs, K. (2008)	Administrative Clinical Supervision as Evaluated by the First Line Managers in One Healthcare Organization District.	Journal of Nursing Management 16 (5), 582-594.
Smith, B. (2008)	Know When to Wean.	Men in Nursing 3 (1), 34-39.
Viola, M., Bryant, D. & Howes, J. (2008)	Empowering Patients Leads to Better Diabetes Care: A Collaborative Approach. AACN View Point.	The Voice of Ambulatory Care Nursing 30 (1), 8-11.
Wiggins, M. (2008)	The Partnership Care Delivery Model: An Examination of the Core Concept and the Need for a New Model of Care.	Journal of Nursing Management 16 (5), 625-634.
Wiggins, M. (2008)	The Challenge of Change. In: C. Lindberg & C. Lindberg (Eds.) On the Edge: Nursing in the Age of Complexity.	Plexus Press. Bordentown, New Jersey. pp 1-21.
Wilson, L. (2007)	Making Patient Education a Priority. Advances for Nurses.	Available at: www.advancweb.com/nurses . August 28, 2007

Staff



Kristina Hyrkäs

DIRECTOR, DR. KRISTIINA HYRKÄS, RN, MNSC, LICNSC, PHD

Kristiina is currently the Director of the Center for Nursing Research and Quality Outcomes and has been working at MMC since October 2005. Kristiina has worked as a staff nurse (RN) in the Intensive Care Unit of Turku University Hospital and the ER in the Loimaa District Hospital. She has specialized in both surgical and oncology nursing. She began teaching in the Pirkanmaa College of Nursing in 1988 as a full time lecturer where she taught all acute care courses. Kristiina completed her Master's degree in 1992, Licentiate Degree (DNP) in 1997 and Doctoral Degree in 2002. The topic of her doctoral thesis was: Clinical Supervision and Quality Care. Her academic teaching career started in 1994 at the University of Tampere. She worked first as a Planning Officer, and after that as a Senior Lecturer and Senior Assistant Professor in the Department of Nursing Science. From 1997 to 2002 she worked as a full time researcher at the University of Tampere, Department of Nursing Science. In 2002 she moved from Finland to Canada to work as an Assistant Professor at the University of Alberta, Faculty of Nursing and Associate Professor at the University of Northern British Columbia. Since moving to Portland, Kristiina has been appointed as Adjunct Professor of Nursing at the University of Southern Maine. Her primary research interests are (a) quality and quality related issues in health care, (b) patient satisfaction, (c) clinical supervision, and (d) teaching and learning nursing. Kristiina is an editorial board member for two international journals: Journal of Nursing Management and Journal of Advanced Nursing. She was the Guest-Editor for the November 2006 Issue for the Journal of Nursing Management, theme: Clinical Supervision and she has been an Associate Editor of this journal since January 2007. Kristiina also co-chairs the publication committee of the International Network for Doctoral Education in Nursing (INDEN). She reviews manuscripts for ten academic journals: Advances in Health Science Education, Hoitotiede (Nursing Science, in Finnish and Swedish), International Journal of Nursing Studies, Journal of Advanced Nursing, Journal of Clinical Nursing, Journal of Happiness Studies, Journal of Nursing Management, Journal of Nursing Scholarship, Journal of Scandinavian Caring Sciences, and Sairaanhoitaja –lehti (The Nurse, in Finnish and Swedish). Kristiina has published 50 articles, nine book chapters and three books. She is also the member of the IRB (MMC), the Clinical Research Advisory Board (CRAB/MMC), Research Strategic Planning (RSP/MMC), Sigma Theta Tau and the Eastern Nursing Research Society (ENRS)/Membership Board member.



Carole Parisien

NURSING ANALYST, CAROLE PARISIEN, BSN, MS

Carole is a Nursing Analyst who started at Maine Medical Center in 1991 and joined the Center in January 2006. Carole received her Bachelor and Master of Science degrees in Nursing from the University of Southern Maine. Her long nursing career includes a wide range of clinical and management experiences: as a staff nurse on a medical/cardiac step-down unit; Head Nurse on a 30+ bed unit, managing 60+ nursing staff; Patient Education Coordinator; Discharge Planning Nurse and Utilization Review Nurse; Clinical Associate and Office

Manager for an orthopedic surgery practice and Director of Professional Clinical Services for home parenteral and oxygen therapy services. Carole provides the leadership support for:

- National Database of Nursing Quality Indicators (NDNQI) & Maine Quality Forum (MQF) as the Site Coordinator who supervises data collection/submission of Nursing Sensitive Indicators and report dissemination
- RN Satisfaction Survey as the Survey Coordinator
- Nursing Practice & Nursing Clinical Quality Councils
- Policies/Procedures and Nursing Practice Innovations
- Development of nursing documentation forms
- Development of the Raw Data Bank to capture unit-specific quality indicators
- Pressure Ulcer Excel Database to capture data from the monthly prevalence studies
- Nursing Balanced Scorecard to collect and disseminate outcome data
- Annual Magnet Report as the Magnet Project Coordinator who supervises data collection/submission
- Magnet Mentoring as the Magnet Project Coordinator who coordinates the Magnet Site Visits and the Magnet List Serve to provide mentoring to organizations interested in the Magnet journey

Carole is a member of the Nursing Magnet, Marketing & Communication, Nursing Clinical Quality and Nursing Practice Councils, Maine Magnet Networking Collaborative, and Sigma Theta Tau.

RESEARCH NURSE COORDINATOR, DEB PALMER, RN, MS



Deb Palmer

Deb joined the Center in June 2004 as the Research Nurse Coordinator. She had previously worked at MMC for 17 years in the Neonatal Intensive Care Unit (NICU), left to pursue other opportunities in the health care field and returned to MMC in this position. Deb received her Bachelors of Nursing from the University of Southern Maine and her Masters Degree from Northeastern University in Boston. She has served as the Principle Investigator in both qualitative and quantitative research studies. Deb is a manuscript reviewer for the Journal of Advanced Nursing and the Journal of Nursing Management. Her passions are Evidence based practice, research, research translation and mentoring. She has presented both nationally and internationally and has published five articles.

Deb is also a member of the American Nurses Credentialing Center (ANCC) as a provider-unit member providing contact hours for educational offerings from the Center.

Deb provides leadership support for:

- Clinical Scholar Program
- Nurses on all aspects of research, quality improvement and EBP projects in collaboration with Kristiina Hyrkäs and Kimberly Harvey.
- Nurses on all aspects of the ethical and scientific conduct of research in collaboration with Kristiina Hyrkäs and Kimberly Harvey.
- Developing and reporting nursing research indicators on the Nursing Balanced Scorecard
- Nursing Research Council member
- Liaison between MMC's Department of Nursing and Maine Medical Center's

Research Institute regarding joint initiatives and any projects overlapping the two departments

Deb is a member of Sigma Theta Tau International and a Board member of Kappa Zeta Chapter-at-Large.

RESEARCH ASSISTANT, DENISE DENDE, MFA

Denise joined the Center in February 2007. Prior to coming to MMC, she worked in many industries, the most recent of which was medical devices for the diagnosis of infectious diseases. Since joining the Center, she has prepared grant submissions, article manuscripts, literature reviews, and poster and podium presentations. She has also assisted in data analysis, extensive literature searches, manuscript and report editing, and study design and protocol development. Together, with Kristiina, she co-edited the July 2008 Clinical Nursing Leadership theme issue for the Journal of Nursing Management. She has acted as an investigator on several interdisciplinary research and quality improvement teams. She is a team member of an international research initiative and has facilitated ongoing communication among the members of a large multi-site study. She has worked extensively on the development of the Partnership Care Delivery Model from its theoretical, philosophical and conceptual framework through to the projects and research studies that will create the evidence base for the model. She received a Bachelor of Arts and Master of Fine Arts degree from The Pennsylvania State University. Having worked as a Human Resource Manager for several years and having earned certification as a Senior Professional in Human Resources in 2001, she also reviews and edits manuscripts for the Journal of Nursing Management, particularly those dealing with the work environment, leadership, supervision, training, development and job satisfaction.

DATA ANALYST II, KIMBERLY HARVEY, BS, MPH



Kimberly Harvey

Kimberly joined the Center in March 2007 as a Data Analyst. She liaises with nurses to provide statistical consult and reviews methodological studies prior to submitting proposals to the IRB. Kimberly works closely with several internal committees related to quality improvement. She monitors and manages prevalence/incidence data of certain nursing sensitive quality indicators such as visual infusion phlebitis and pressure ulcers, as well as involvement in compliance of falls assessment documentation. Additionally, she is the lead investigator of the house-wide pediatric falls initiative. She was an invited author for the Nurse Researcher in 2007 and began post as statistical reviewer for the Journal of Nursing Management. She previously worked as a statistical analyst within the

Georgia Division of Public Health in Atlanta, GA, in HIV evaluation. Kimberly received a BS in health science from Clayton State University in 2003 and an MPH from Mercer University School of Medicine in 2005. Her background includes technological-based statistical methodologies of quantifying health data and information. Her areas of interest include probability, nonparametric inference, statistics in the use of diagnosis and treatment of disease and disease patterns, survey development, data management and quality controls, population-specific mapping and study design. She is a member of the American Statistical Association. She has four major publications related to state-level research initiatives.



Deborah Martin-Smedal

ADMINISTRATIVE ASSOCIATE II, DEBORAH MARTIN-SMEDAL

Deborah joined the Center in March 2008 as the Administrative Associate II. She has over 28 years of experience in a variety of industries with over 10 years in the health care field. She has held several executive support positions including Executive Assistant to the Vice President of Clinical Services at Jackson Brook Institute. Her background includes banking, rehab medicine, biotechnology manufacturing, psychiatric and medical transcription. She supports primarily the Nursing Analyst working with NDNQI and Magnet projects. She also supports the council work that is overseen by the Center.



Jean Bearor

PROJECT MANAGER, JEAN BEAROR

Jean joined the Center as Project Manager on June 2, 2008. Her diverse career in the health care field includes 20 years as a Director of Clinical Laboratory Services as well as Safety Director. She has experience as a team leader in several hospital processes: JCAHO Task Force, Process Improvement, Environment of Care, and Patient Safety. She recently worked for the Healthy Maine Partnership as a School Health Coordinator for three school districts. She is supporting the development of the Partnership Care Delivery Model and has been working on the projects related to medication adherence, medication access, motivational interview training and partnership rounding.



Bernadette Lehouillier

CLINICAL NURSE II, BERNADETTE LEHOULLIER, RN

Bernie is a per-diem nurse who coordinates the review of policy/procedures and standards of care by the Nursing Practice Council. She served two years as the co-chair of the Nursing Practice council in 2004-2006 and has extensive experience with policy writing and reviewing. Bernie is a Clinical Nurse II, who started to work at MMC in 1986, and joined the Center in June 2008. Bernie received her Bachelor in Nursing degree from the University of Southern Maine. Her nursing career includes a wide range of clinical experiences: as a staff nurse on a medical/surgical unit, special care unit, and several cardiology units. She has also worked as a Thrombosis Nurse Researcher. Currently she works in Radiology Nursing and enjoys supporting the nursing practice council in the facilitation of the policy process one day per week.



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